



Improvement Plan Application

Campbell County and Municipal Planning & Zoning Commission

1010 Monmouth Street

Newport, Kentucky 41071

Phone: (859) 292-3880

Fax: (859) 547-1868

www.campbellcountky.org

****ALL BLANKS MUST BE COMPLETELY FILLED OR
THE APPLICATION WILL NOT BE ACCEPTED****

Section A (to be completed by the applicant)

1. Name of Subdivision_____
2. Street Location of Project_____
3. Jurisdiction/Location:

<input type="checkbox"/> Unincorporated Campbell County	<input type="checkbox"/> City of Melbourne
<input type="checkbox"/> City of Crestview	<input type="checkbox"/> City of Southgate
<input type="checkbox"/> City of Silver Grove	<input type="checkbox"/> City of Woodlawn
4. Preliminary Plat Approval Date_____
5. Acreage Under Review_____ No. of lots_____
6. Current Municipal Zoning Designation of Property_____
7. Is the Site Subject to a:
Variance_____ If so, Date of Approval?_____
- Conditional Use Permit_____ If so, Date of Approval?_____
8. Was the Site Subject to a Zone Change?_____ If so, Date of Approval?_____
9. Proposed Improvements(s)_____

10. Applicants Name_____
Address_____

City State Zip
Phone Number_____ Fax Number_____

11. Surveyor's Name _____
Address _____

City State Zip
Phone Number _____ Fax Number _____
12. Engineer's Name _____
Address _____

City State Zip
Phone Number _____ Fax Number _____
13. Owner of Property _____
Address _____

City State Zip
Phone Number _____ Fax number _____
14. Height of Proposed Building(s) or Addition _____
15. Square Footage of Existing Building(s) _____
16. Square Footage of Proposed Building(s) or Addition _____
17. Deed Book _____ Page No. _____ Group No. _____
18. I, or we, understand and agree that this application and drawing(s) are being filed in accordance with the Campbell County Subdivision Regulations and that all construction work will be performed in accordance with the Campbell County Subdivision Regulations.

Applicant's Signature _____

Property Owner's Signature _____

Part B (Submission Requirements)

1. **One (1) copy** of this application.
2. **Three (3) copies** of improvement drawings, **stamped and signed by a Kentucky Licensed Professional Engineer**, meeting all the requirements of Article III, Sections 3.5 and 3.6 of the Campbell County Subdivision Regulations.
3. Fee (s) as per current Campbell County Zoning Fee Schedule.
4. In order for Staff to properly evaluate this submittal, the applicant **shall** submit copies of the improvement drawings to the following **applicable** agencies and submit a documented response, in reference to **completion of said improvements**, to the Campbell County Planning and Zoning Commission **with the final plat submission**.

These agencies are:

Campbell County Historical Society
Campbell County Conservation District
Cincinnati Bell Telephone
Governing Fire District Marshall
Kentucky Department of Transportation (K.D.O.T.)
Kentucky Division of Water Floodplain Management
Northern Kentucky Independent Health District
Northern Kentucky Water Service District / Pendleton County Water District
Sanitation District No. 1 of Campbell and Kenton Counties
Union, Light, Heat, & Power Company (ULH&P) / Owen County Electric
United States Corp of Engineers
United States Department of Agriculture Natural Resources Conservation Service

Section C (to be completed by the Campbell County Zoning Staff)

1. Date Received_____ Fee Received_____
2. Is this application complete ☐ Yes ☐ No
3. Staff Reviewer_____
4. Staff and Committee Recommendation:
☐ Approved
☐ Approved (with conditions see #6)
☐ Denial (see #7)
6. Conditions of approval:_____

7. Reasons for Denial:_____

